



Urcity Media LLC
11 Merwin St Apt.510
Norwalk, Ct
06850
Phone:401-316-6900
Fax: 866-795-4571

Credit Card Authorization Form

CARD HOLDER INFORMATION

Name: _____

Billing Address: _____

City: _____

State: _____

Zip: _____

Email Address: _____

PAYMENT AUTHORIZATION

Card Type: Visa MasterCard Discover Amex

Card Number: _____ Expiry Date: _____

Card Identification Number (CVV2 Code): _____

I, _____ authorize Urcity Media LLC to process a monthly charge for
against my

credit card account in the amount of \$ _____

for the payment of Advertising Package: _____

Telephone Number: _____ Fax Number: _____

Print Name as it appears on Credit Card: _____

Signature: _____

Date: _____

Note: COMPANY NAME does not keep a file of credit card numbers. At the completion of the transaction, this document with your credit card number will be shredded.